

2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P01000114337

Entity Name: A WINNER, INC.

FILED
Nov 07, 2009
Secretary of State

Current Principal Place of Business:

6673-B LAKE WORTH ROAD
N/A
LAKE WORTH, FL 33467

Current Mailing Address:

6673-B LAKE WORTH ROAD
N/A
LAKE WORTH, FL 33467

New Principal Place of Business:

6673-B LAKE WORTH ROAD
N/A
LAKE WORTH ROAD, FL 33467

New Mailing Address:

PO BOX 191880
N/A
MIAMI BEACH, FL 33119

FEI Number: 65-1156208

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

FIEFE, ANDRE
6673-B LAKE WORTH ROAD
N/A
LAKE WORTH ROAD, FL 33467 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: ANDRE FIEFE

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ()

OFFICERS AND DIRECTORS:

Title: PTD () Delete
Name: FIEFE, ANDRE CEO
Address: 6673-B LAKE WORTH ROAD
City-St-Zip: LAKE WORTH, FL 33467 US

Title: VP (X) Delete
Name: SERGE, PAUL
Address: 1690 FOREST LAKE CIR A
City-St-Zip: WEST PALM BEACH, FL 33406

Title: DOF (X) Delete
Name: PATRICK, WONSEY P
Address: 856 CREEKWAY COURT
City-St-Zip: BRANDON, FL 33511 US

Title: CONT (X) Delete
Name: MICHEAL, CHIANG SEC
Address: 1912 19TH LANE
City-St-Zip: GREENACRES, FL 33463 US

Title: MD (X) Delete
Name: WILDER, DEL HOMME DHR
Address: 1660 FOREST LAKES CIR A
City-St-Zip: WEST PALM BEACH, FL 33406 US

Title: IED (X) Delete
Name: DAT, DO T DOS
Address: 581 CRESTA CIRCLE
City-St-Zip: WEST PALM BEACH, FL 33413 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
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Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ANDRE FIEFE

Electronic Signature of Signing Officer or Director

PTD

11/07/2009

Date